Sybil - Class Discussion Questions

The following questions examine the made-for-television film, *Sybil*. Thinking and answering the questions will help us deepening our understanding of Sybil’s mental condition.

1. At the beginning of the film, why is Sybil standing in the water fountain?
2. Using what you know about dissociative identity disorder, explain why, Sybil doesn’t remember how long she has been in Dr. Wilbur’s office.
3. In the beginning, how aware was Sybil of the other personalities? Imagine being Sybil as she becomes more aware. How would you feel? What would you think?
4. Select three of the following personalities and explain their significance by giving a brief description. In particular, describe why Sybil developed each personality.

   Sybil  Peggy  Marsha  Mike
   Vicki  Vanessa  Mary

5. Sybil kept making references to things that did not seem to make sense until the end of the film. Explain the significance of three of the following:
   a. “Guards around the Palace”
   b. “I can’t see anything, there are dishtowels that were put on by the hands.”
   c. “The hands” Who did they belong to? Why were they just hands and not a part of a whole person?
   d. “Music goes round and round”
   e. Picture of a lightbulb
   f. Picture of mother

6. Do you believe Sybil’s mother has some sort of psychological disorder? If so, what might she have? If not, how do you otherwise explain her behaviour?
7. Who does Sybil’s mother have serious issues with in this movie?
8. Dr. Wilbur treated Sybil by using psychoanalysis. Explain what three parts of psychoanalysis she used.
9. Each of Sybil’s dissociative identities (personalities) is triggered by a word, phrase, or action. Select four of the following triggers and explain their significance for Sybil and why it draws out one of her personalities.

   “Oh Christmas Tree, Oh Christmas Tree.” Piano playing
   Swing set (crickety noise) White hair
   Hooks (button hooks) Disinfectant
   The colour green The colour purple
   Dripping of water Armageddon

10. What were your overall impressions of this movie? Did it help you understand Dissociative Identity Disorder? Why/why not?
11. Based upon the two video presentations we have seen (the documentary *When the Devil Knocks* and the film *Sybil*) what is your opinion about the controversial diagnosis of dissociative identity disorder (aka multiple personalities)? Do you think it is a legitimate disorder or do you think people who claim to have it are faking? Upon what is your opinion based?
The true story behind Sybil and her multiple personalities

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The story of Sybil — a young woman who had been abused by her mother as a child and, as a result, had a mental breakdown and created multiple personalities — caused a sensation. Sybil was a bestseller in the 1970s and was adapted as a 1976 television mini-series and a feature-length docudrama in 2007. Author Flora Schreiber and Sybil's psychiatrist, Dr. Cornelia Wilbur, became rich and famous as a result. Sybil also profited, but her true identity remained a secret until after all three women were dead.

Much of the sensational story was fabricated, according to journalist and author Debbie Nathan. She reveals the truth about the case in her new book, Sybil Exposed: The Extraordinary Story Behind the Famous Multiple Personality Case, which she discussed in a recent interview on The Current.

In the original book, Sybil is portrayed as a young woman who started seeing a psychoanalyst in New York City in the early 1950s. Nathan described what happened after a few sessions, as detailed in the book: "She had a very dramatic moment when she started smashing windows, and split into another personality, into a little girl. And as she went into further therapy with the therapist, she developed many other personalities, a total of 16. The therapist assumed that something terrible must have happened to her when she was a child to create this kind of splitting in her consciousness. So she spent many years working with her. And ultimately Sybil remembered terrible, hideous sexual abuse and torture by her mother, and once she came to remember that, she reintegrated and was able to have a happy life after that. So the book had a happy ending."

Sybil's case generated widespread fascination both in the general public and the medical community, and a group of psychiatrists and psychologists successfully lobbied to have multiple personality disorder included in the DSM (Diagnostic and Statistical Manual). Once that happened, the disorder, which had been extremely rare, became a relatively common diagnosis. "In the entire history of Western civilization, there had been less than 200 [cases] over a period of centuries," Nathan said. "But after the book and film, suddenly there were hundreds and thousands. And by the late 1980s there were 40,000 cases diagnosed in the United States alone."

Sybil's real name was Shirley Mason, and she was brought up as a Seventh Day Adventist in rural Minnesota. The fundamentalist Christian sect taught that people shouldn't read fiction. But Shirley was a highly imaginative child, who loved to make up stories. "She lived in a fantasy world as a little girl," Nathan said. By the time Shirley was in college, she was having psychological problems, and she went to see Dr. Wilbur in the 1940s.

Dr. Wilbur had an interest in multiple personality disorder, and she recommended that Shirley read up on the subject; a mistake, in Nathan’s view, as Shirley was so prone to fantasize. But it wasn't until a few years later, in the early 1950s, that Shirley returned to therapy and the multiple personalities emerged.

"One day Shirley just knocked on Dr. Wilbur's door and said, 'Hi, I'm Peggy,' a nine-year-old alter personality," Nathan explained. "Dr. Wilbur barely blinked an eye. She seemed very pleased that she now had a multiple personality disorder patient. She told Shirley she'd treat her for free, on credit, and she began giving her strong psychotropic drugs and barbiturates. Within a few weeks, [Dr. Wilbur] asked Shirley if she'd like to write a book with her about the case."

One of the drugs Dr. Wilbur administered was Thorazine, "an anti-psychotic that can have very, very strong side effects, including hallucinations," Nathan said. "And she gave her intravenous barbiturates, which can cause all kinds of fantasies which seem very real while the person's having them. They're like nightmares, but when you wake up from them, you believe that the material you fantasized really happened."

Nathan discovered the truth by poring over the papers of Flora Schreiber, the journalist who collaborated on the book. Her papers, which included thousands of pages of therapy material between Dr. Wilbur and Shirley Mason, had been sealed until 2001, because it wasn't until then that it was
known whether Shirley was alive or dead.

Though Sybil ends happily, the woman who inspired the story did not. Shirley became a barbiturate addict, and was heavily dependent on Wilbur, who paid her rent, gave her clothes and money, and supplied her with drugs. Nathan likened the relationship to that of a junkie to her pusher.

Nathan speculates that Dr. Wilbur's motivations were based on the fact that she never had children. "From the 1930s to the 1950s, in psychiatry and the popular culture, you were not a fully realized woman unless you had children," Nathan explained. "And I think Dr. Wilbur wanted a daughter. And I think that was the real dynamic of the relationship."

In therapy, Shirley would imply that the personalities were generated because something terrible had happened to her. "The doctor would ask leading questions, which quickly came to focus on her mother," Nathan said. "Eventually there was a very detailed story of sexual torture by the mother, and that torture was supposed to have been so horrifying that Shirley the child, or Sibyl, just had to encapsulate that in different parts of her consciousness so she wouldn't remember it."

Journalist Flora Schreiber got involved because although Dr. Wilbur believed the case would make her famous, she wasn't a good writer. Eventually, as Schreiber started fact-checking the story, she began to doubt its veracity. But by then she had already been paid an advance, and when she confronted Dr. Wilbur and Shirley, they stuck by the story.

At the time the book was published, it was considered shaming to go to a psychiatrist, so Shirley tried to keep her identity secret. But some people did realize that Shirley Mason was Sybil. "Flora did very little to actually disguise Shirley's identity," Nathan pointed out.

Shirley had gotten a job teaching art at a college in the Midwest. But when she was effectively "outed" among colleagues, she ended up going into hiding and depending on Dr. Wilbur for support. "It was a sad ending to a very, very glittery beginning with that book," Nathan said.

Nathan went on to say that the case created a stir because it touched on issues that many women were dealing with at the time. "This was a woman's book, and the diagnosis that developed was a woman's diagnosis — 90 percent of people who have multiple personality disorder, or get diagnosed with the new name, dissociative identity disorder, are women."

Many young women wrote to Schreiber to say that Sybil's story struck a chord with them. They felt torn between the traditional female role and new opportunities that were opening up as a result of feminism. "Reading about this poor girl, who had developed all these personalities, and vanquished them, and put them all together and learned how to use them, well, that's the inspiration that I got from reading Sybil, that I can take all of my different selves and put them back together and lead a full life," Nathan said.

In Nathan's view, there are more constructive options for dealing with that tension. "To medicalize the sense of splitting and say that you are a woman who's very, very ill, because you are the ultimate victim, I think didn't do women any favours. And continues not to do them any favours."

The diagnosis of Dissociative Identity Disorder "clearly exists, when you have experts who are interested in finding it and they diagnose it," Nathan acknowledged. But she compares it to the Middle Ages, when it was assumed many people were possessed by devils. "Most women who went to the inquisitors during that period and said that they felt they had devils inside them weren't tortured to say that. They freely went to the inquisitors and the priests and said that they felt possessed."

Nathan added that it's not uncommon for people to "express their distress by feeling that there's something inside them, whether it's a demon or a spirit or a self, there's something inside them that doesn't really belong there. And depending on what's going on in the culture, and who's available to define that and treat it, you can get epidemics of that feeling, and you can get epidemics of diagnoses. So I think that that's what happened here."

She hastens to say that she isn't suggesting that people are faking their illness. "Once people get the diagnosis of Dissociative Identity Disorder, they have that diagnosis, and they act that out, not consciously, necessarily, at all," Nathan said. "So I think that asking whether it's true or it's false is not the helpful way to think of it."